FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

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Principal Place of Business			Mailing Address 4367 NORTH FEDERAL HIGHWAY									
4367 NORTH FI FT. LAUDERDA		WAT			ERDALE FL 3							
							0	te Incorporated o) 7/11/1995	or Qualified	3a. Dat	e of Last R€	
2. Principal Plac	e of Business		h	ı. Mailing /	Acidress			Number \$ 5-05, 9	3 996		-	Applied For Not Applicable
Suite, Apt. #,	elc.		26	Suite A	pt. #, etc	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		rtificate of Status			- - · ·	Additional Required
2			27	City & S	State		6 Fig.	ection Campaign	Financino			May Be
Orty & State			28	1 '	, w. G		Tru	ust Fund Contribu	ution		Adde	d to Fees
Zip		Country		7 ₍₀)		Country		is corporation ha orida Statutes	s liability for	intangible t	ax under s	199.032,
4	n Name ar	nd Address of Cu	rrent Regi			30	10. Na	ame and Addre			Agent	
	g, Italiic a	IO Addiess of Co			<u> </u>	81 Name						
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FT. LAUD	erdale fl	. 33308	0502 and f Florida. Su Section 60	507,1508, l ch change 7,0505, Flo	Florida Statut was authoriz orida Statute:	<u> </u>	orporation subsidered of direct	mits this stateme stors. Thereby ac	nt for the pu cept the app		<u>- </u>	· · · · · · · · · · · · · · · · · · ·
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SIGNATURE:

I do hereby certify that the information supplied with this shill is voluntarily full that a lid does not expend to expend the information indicated on this arrival report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

GNATURE:

SIGNATURE AND TIPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE AND TIPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR